



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

1623362 - R8 SEMS

REGION VIII

999 18th STREET - SUITE 500
DENVER, COLORADO 80202-2466

JUL 2 1997

280341

13474

8TMS-G

Randy Davis
Riedel Environmental Services, Inc.
18079 Edison Avenue
Chesterfield, MO 63005

☐ AR
☒ SITE
☐ POST DECISION PUBLIC DOCUMENT
☐ PRIVILEGED/CLAIM
☐ FOIA EXEMPT/CLAIM
☐ WORK PERFORMED DOCUMENT
CONTRACT # _____
FILE PLAN # 3.01.11
KEYWORD #(S) _____

Re: Invoicing Procedures

Dear Mr. Davis:

The enclosed invoices (invoice #9000-31, D.O. #0035-08-050; and invoice #9068-26, D.O. #0035-08-061) are being returned to Riedel uncertified because of unapproved 1900-55s. In accordance with Contract 68-W1-0035, Section G, Clause G.7, Submission of Invoices, paragraph D, one copy of the invoice shall be accompanied by readable copies of the Contractor Daily Cost Reports required under Contract Clause F.3, Reports of Work, and other documentation to substantiate all costs for which reimbursement is requested. Also, in accordance with Section F, Clause F.3, Reports of Work, paragraph 1, a final 1900-55 is to be delivered at the end of each work day, on-site, or no later than noon the following day. The final 1900-55 is signed by the Contractor and the OSC after a draft 1900-55 has been reviewed by the Contractor and the OSC.

Please be advised that future invoices received for certification by this office without substantiating information, such as a final 1900-55 approved by the Contractor and OSC will be returned uncertified. As stated in Clause G.7, the Daily Cost Reports substantiate all costs for which reimbursement is requested. Additionally, our Research Triangle Park office will be notified that the invoice was returned by this office and they will then return their copy of the invoice.

If you have any questions on this matter, please contact me at (303) 312-6527 or Lisa Walker at (303) 312-6475.

Sincerely,

Clyde R. LoSasso
Contracting Officer

Enclosures

cc: Gloria Owens, RTP;
OSCs



Printed on Recycled Paper

ROUTING AND TRANSMITTAL SLIP

Date

7/2

TO: (Name, office symbol, room number,
building, Agency/Post)

Initials

Date

1.

Steve Hawthorn

2.

3.

4.

5.

Action	File	Note and Return
Approval	For Clearance	Per Conversation
As Requested	For Correction	Prepare Reply
Circulate	For Your Information	See Me
Comment	Investigate	Signature
Coordination	Justify	

REMARKS

SANDY
 NO
 NO

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

FROM: (Name, org. symbol, Agency/Post)

Lisa TMS-G

Room No.—Bldg.

Phone No.